

2005 - 2006
NCLB Programmatic Monitoring
Compliance Activities Worksheet

Cycle
5

LEA _____

Date _____

Person Completing Checklist _____

E-mail Address _____

Phone Number _____

Item To Be Addressed	How Item Will Be Addressed (Use verbs like develop, disseminate or train)	LEA Person Who Is Responsible	Date Completed
Completion of Cycle 4 On-Site monitoring compliance activities.			
Technical assistance requested for: _____ _____	Contacted: <input type="checkbox"/> ADE Specialist or <input type="checkbox"/> Consultant or <input type="checkbox"/> Other _____		